FOR INSTRUCTIONS, SEE BACK OF FORM		FORM		
DISCLOSURE SUMMARY PA	IGE	DR-2	2 DISCLOSURE	
COMMITTEE NAME (Must be same as on Statement of Organiz	zation) (A ETHICS AND	(Rev. 12/	2005) REPORT	
• 5	JAMPAIGN DISCLOSURE BU	For Office	Use Only	
Bayter for Supervisor IMPORTANT: Indicate by # type of committee you are reporting for	2000 DEA 11 04 0	1 1		
IMPORTANT: Indicate by # type of committee you are reporting for		i i	1	
(1)Statewide/Legislative/Judge Standing for Retention Candidate	(2)State PAC (3)State Party	1 1		
(4) County Central Committee (5) County Candidate (6) City Car Political Subdivision Candidate (8) County PAC (9) City PAC (10)School Board or Other	1 1	•	
Subdivision PAC (11) Local Ballot Issue		1 1		
CANDIDATE COMMITTEES ONLY:		Addition .		
Candidate Name Kenner M. Dermott Barter	Political Party (if applicable)	File with		
Kenner /II Dermoll Dakter	Democrat		hics and Campaign ure Board	
Office Sought County Superus N	District (if Senate or House)		12 th , Ste. 1A	
County Superison		1 1	ines, Iowa 50319	
Late reports are subject to possible civil and criminal penalties. Pu	ursuant to Iowa Code section 68B.3		5-281-3701	
the candidate, for a candidate's committee, and the chairperson, f				
individual responsible for filing timely and accurate reports.				
Kenner Bed for	<u> </u>	<u> 75 </u>	12/10/09	
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATE SIGNED	
I AM FILING A FINAL	REPORT FOR (1) ELECTION /(2	2)NON-ELECTION	YEAR.	
(report date)	Indicate by			
_				
CHECK IF AMENDMENT TO REPORT DATED		Local Committees	, enter Date of Election	
Check if this is final (termination) report and attach Notice of Di	ssolution Form DR-3			
(You must continue to file reports until a DR-3 is filed.)			y & Local Committees, enter County in Election is held	
wnich			Cass	
		L		
STATEME	NT OF CASH ON HAND		· · · · · · · · · · · · · · · · · · ·	
CASH ON HAND at the beginning of the reporting period. (Total of committee. This amount MUST be the same as the cast				
of the last reporting period or must be zero if this is first		\$	2.87	
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Schedule	A) (*also see in-kind below)		60.26	
Schedule F: Loans Received total (Attach Schedule F).				
Schedule H: Total Sales of Campaign Property (Attach				
	•			
(Schedule H applies to Candidates' Comm				
	SUB-TOTAL	\$	<u>63.13 </u>	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD				
Schedule B: Expenditures total (Attach Schedule B) (**	*also see debts and loans below)		63.13	
Schedule F: Loan Repayments total (Attach Schedule F	-)	<u> </u>		
CASH ON HAND at the end of this reporting period (if final report	balance must		_	
be zero) (Attach DR-3)		s <u> </u>		
HINDAID DILL C/Crom Cabadida D. Alfreda Cabadida D.		œ.		
**UNPAID BILLS (From Schedule D - Attach Schedule D)				
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E				
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)				
CONSULTANT BREAKDOWN (Schedule G Attached?)		YES	$\frac{X}{N}$ NO	
CANDIDATE COMMITTEES ONLY				

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

COMMITTEE NAME (Must be same as on Statement of Organization) Boxfer for Supervisor				CHECK THIS BO AMENDING FOR	1
`	TES NOTE: IF A CONTRIL	BUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAIL	N COMMITTEE), LIST THE F LABLE FROM THE IOWA ET	PAC IDENTIFICATIO	DN GN
NOTE: ANY PER RESPONSIBILITI	SON, OTHER THAN AN	INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 T DIATELY CONTACT THE BOARD.	O YOUR CAMPAIGN M/	AY HAVE FILING	
CAUTION: Sector commercial purp	tion 68B.32A(6), prohibi oose by any person othe	ts the use of information copied from reports and stater than statutory political committees.	ments for soliciting cont	ributions or for ar	ny
DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
3/10/09	ID# CK#	Kenner Baller P.O.Bix 11 Mark 12 51552	self	\$60.27	
	ID# CK#				
	ID#				•
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
:	CK#				
<u> </u>	ID#				1
	CK#				
	ID#				
	CK#		•		
	ID#				
	CK#				
	ID#				-
	CK#				
SUB-TOTAL				\$	
TOTAL (if last page of this schedule)]

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no

familial relationship, enter "not applicable" in the relationship column.

SCHEDULE

(Rev. 07/03)

MONETARY

RECEIPTS

* For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES			
☐ CHECK THIS BOX IF AMENDING FORM				

COMMITTEE NAME (Must be same as on Statement of Organization)				
7	poster for	Supervisid		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NÄME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	ID#	Tier / Bank	and Dra Cot Coo die to	
3/10/09	CK#	Tier 1 Bank, 509 Clashout Allantic M 50000	madire account	\$ 63.13
	ID#			
	CK#			
	ID#			
	CK#			٠
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
			SUB-TOTAL	\$
			TOTAL (If last page of this schedule)	\$ 63.13

THIS BOY AT	ו ומפ	EC TO CAL	UDIDATER	COMMITTEES	ONI V.

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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Page .	/	of	/